

EXHIBIT H

2016-0946

SUBJECT

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1. LAST NAME Vann		FIRST David		M.I. C	2. DATE 9/4/15	3. TIME 2328	4. CR # 15-235240		
5. DOB 12/18/91	6. SEX Male	7. RACE Black	8. HEIGHT 5'9"	9. WEIGHT 160	10. INCIDENT LOCATION 439 South Avenue		BEAT 229		
11. ARREST? <input type="checkbox"/> NO – release approved by: <input checked="" type="checkbox"/> YES – charges: Assault 2 nd , Assault 3 rd , Resisting Arrest, Trespass									
12. SUBJECTS ACTIONS Subject resisted by (check all that apply and explain in narrative)		13. TACTIC EFFECTIVENESS Check the appropriate box indicating whether the tactic was used, if the tactic was used write the number (1,2,3...) indicating what order the tactics were used in column one (1). In column two (2) write E, for Effective, ME, for Moderately Effective and NE, for Not Effective.							
		Order		Effectiveness		Order Effectiveness			
<input checked="" type="checkbox"/> Verbal Resistance (Failing to adhere to verbal commands) <input type="checkbox"/> Passive Resistance (dead weight) <input checked="" type="checkbox"/> Active Resistance (pulling away, striking or attempt assault) <input type="checkbox"/> Armed Resistance (uses or attempts to use a weapon or dangerous instrument)		<input checked="" type="checkbox"/> Verbal <input type="checkbox"/> Mandibular Angle <input type="checkbox"/> Hypoglossal Nerve <input type="checkbox"/> Jugular Notch <input type="checkbox"/> Clavical Notch <input type="checkbox"/> Brachial Stun <input type="checkbox"/> Suprascapular Stun <input type="checkbox"/> Jab <input type="checkbox"/> Front Kick <input type="checkbox"/> Straight Punch <input type="checkbox"/> Angle Kick <input type="checkbox"/> Forearm Strike <input type="checkbox"/> Knee Strike <input type="checkbox"/> Defensive Wedge <input type="checkbox"/> Hooking Technique <input type="checkbox"/> Ground Stabilization (ie. 3-Point Landing, joint manipulation)		1	NE	<input type="checkbox"/> Forward Spin <input type="checkbox"/> Shin Sheer <input type="checkbox"/> Arm Lock <input type="checkbox"/> Front Jab w/Baton <input type="checkbox"/> Rear Jab w/ Baton <input type="checkbox"/> Flat Chop <input type="checkbox"/> Upper Chop <input type="checkbox"/> Forward Spin <input type="checkbox"/> Reverse Spin <input type="checkbox"/> Inside Spin <input type="checkbox"/> Power Spin <hr/> <input type="checkbox"/> OC <input type="checkbox"/> Taser <input type="checkbox"/> Bean Bag <input type="checkbox"/> Hand Gun <input type="checkbox"/> Long Gun <input checked="" type="checkbox"/> Other: Bent Arm Bar <input type="checkbox"/> Other:		2	E
14. Narrative (If officer is in plainclothes, describe own clothing. If tactic(s) used on subject were ineffective, explain reason(s) why.) On the above date and time at the above location, I responded for the report of a trespass. Onscene, I observed Officers Mitchell and Drake having a conversation with (A) Vann who was being uncooperative. While there, I heard Officer Mitchell state to (A) that he was under arrest. As Officer Mitchell grabbed (A)'s left arm, I moved in to grab hold of (A)'s right wrist. While attempting to handcuff (A), he pulled his right hand towards the front of his body while tensing up and pulling away. As he did so, I performed a bent arm bar on (A)'s right arm, forcing him towards the ground. While I did so, (A) continued to attempt to pull away, causing me to lose my balance, making it unable to guide (A)'s body to the ground on his stomach. As we hit the ground, I was able to put the handcuff on (A)'s right wrist, placing him in custody.									
Officer: <input checked="" type="checkbox"/> Primary Officer <input type="checkbox"/> Assisting Officer Name: J. Kester							ID# 2230		

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15. Name	ID #	BWC Assigned	BWC Video	Height	Weight	Section	Pltn	Uniform	Injured/Treated	Cover Page
PRIMARY: J. Kester	2230	No	No	5'9	229	Central	1st	Yes	Yes	Yes
S. Mitchell	2134	No	No	5'8	170	Central	4th	Yes	No	Yes
D. Kephart	2071	No	No	6'0	185	Central	4th	Yes	No	Yes
M. Drake	196	No	No	5'9	165	Central	4th	Yes	Yes	No

WITNESSES – Conduct a neighborhood check and indicate with code: W – Witness/Deposed, NI – Not Interviewed, NO – Interviewed/No Information, WR – Witness/Refused Deposition.

16. NAME	ADDRESS	DAY PHONE	EVENING PHONE	WITNESS CODE
ALGAZALT DAWAN	500 SOUTH AVE #16F			W
DUANE MARACLE	500 SOUTH AVENUE			W
RAFIQ ZAYED	439 SOUTH AVENUE			NO

MEDICAL

*Attach and forward a copy of all depos to PSS and PDS

17. Condition of subject: ☒ Sober ☐ Alcohol Influence ☐ Intoxicated (alcohol) ☐ Drugs

18. Subject injured prior to incident: ☒ No ☐ Yes, describe:

19. Subject injured during incident: ☒ No ☐ Yes, describe:

20. If subject was exposed to O.C., was subject treated: ☐ No ☒ Yes ☐ At hospital ☒ PSB eyewash station

21. Hospitalization: ☒ No – Reason: Evaluated by Paramedic Onscene, no injuries
☐ Yes – Transport via ☐ RPD vehicle # ☐ Ambulance Co./Veh # ☐ Other

22. Hospital: N/A

23. Attending medical professional:

24. Subject: ☐ Admitted ☐ Treated and Released ☐ No Treatment ☐ Refused

25. Time of treatment/refusal:

26. Witness to refusal:

27. Technician work performed: ☐ No – Reason:
☒ Yes by: C. Barber ☒ Photos ☐ Diagram ☐ Other:

Photos of: ☒ Member(s) Kester, Drake, Mitchell ☒ Subject ☒ Other: Location

28. Reports completed: ☒ Crime ☐ Incident ☐ Investigative action
 (DO NOT ATTACH) ☒ Prisoner data ☒ Addendum(s) ☒ Technicians report
☐ Other: ☐ CR #'s:

29. Commanding Officer at scene: J. LaFave Rank: Sergeant Section: Central

ADMINISTRATIVE REVIEW

30. Reviewing Supervisor: T/Lt LaFave Date: 11/15/16

31. Platoon Commanding Officer: T/Lt LaFave Date: 11/15/16